

COMMONWEALTH OF PENNSYLVANIA  
**CAMPAIGN FINANCE STATEMENT**

File this in lieu of a full report *only if* aggregate receipts, expenditures, or liabilities incurred each did not exceed \$250.00 during the reporting period.

FILER IDENTIFICATION NUMBER	REPORT FILED ON BEHALF OF	CANDIDATE <input checked="" type="checkbox"/>	COMMITTEE <sup>2</sup> <input type="checkbox"/>	LOBBYIST <sup>3</sup> <input type="checkbox"/>		
NAME OF FILING COMMITTEE, CANDIDATE OR LOBBYIST <i>Bryan Callahan</i>						
STREET ADDRESS <i>633 Main St</i>						
CITY <i>Bethlehem</i>		STATE <i>PA</i>	ZIP CODE <i>18018 -</i>			
TYPE OF REPORT (CHECK ONE)	NAME OF OFFICE SOUGHT BY CANDIDATE <i>City Council</i>	DISTRICT NO.	PARTY <i>Dem</i>	DATE OF ELECTION		
				MO.	DAY	YEAR
6TH TUESDAY PRE-PRIMARY <sup>1</sup>				<i>11</i>	<i>7</i>	<i>17</i>
2ND FRIDAY PRE-PRIMARY <sup>2</sup>						
30 DAY POST-PRIMARY <sup>3</sup>						
6TH TUESDAY PRE-ELECTION <sup>4</sup>						
2ND FRIDAY PRE-ELECTION <sup>5</sup>						
30 DAY POST-ELECTION <sup>6</sup>						
ANNUAL REPORT <sup>7</sup>						

DATES OF REPORTING PERIOD	MO.	DAY	YEAR	TO	MO.	DAY	YEAR
	<i>10</i>	<i>23</i>	<i>17</i>		<i>11</i>	<i>27</i>	<i>17</i>

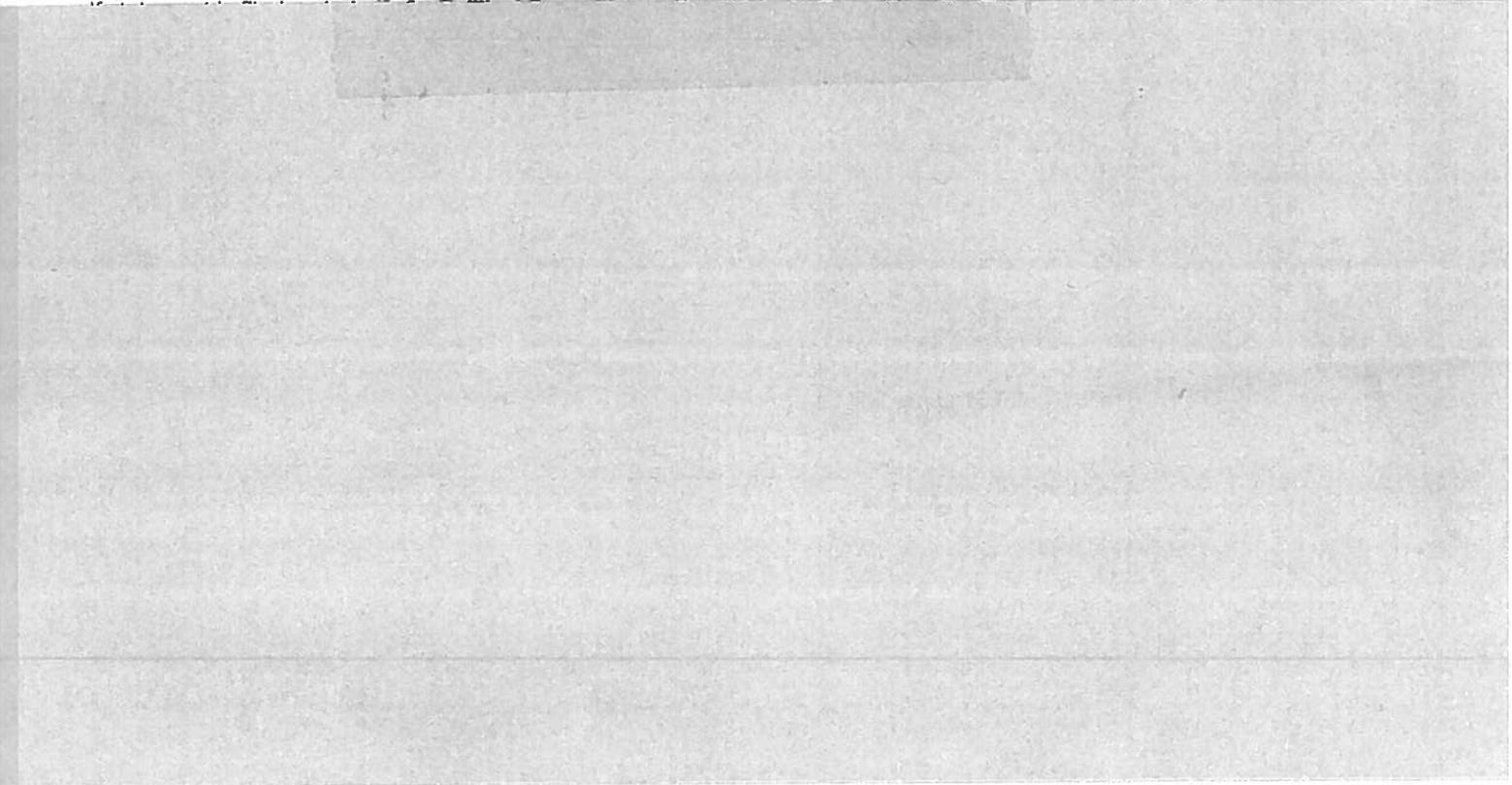
CASH BALANCE AT END OF REPORTING PERIOD:	\$ <u><i>0</i></u>
TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD:	\$ <u><i>0</i></u>

AMENDMENT REPORT?	YES	NO
TERMINATION REPORT?	YES	NO

**AFFIDAVIT SECTION**

PART I -



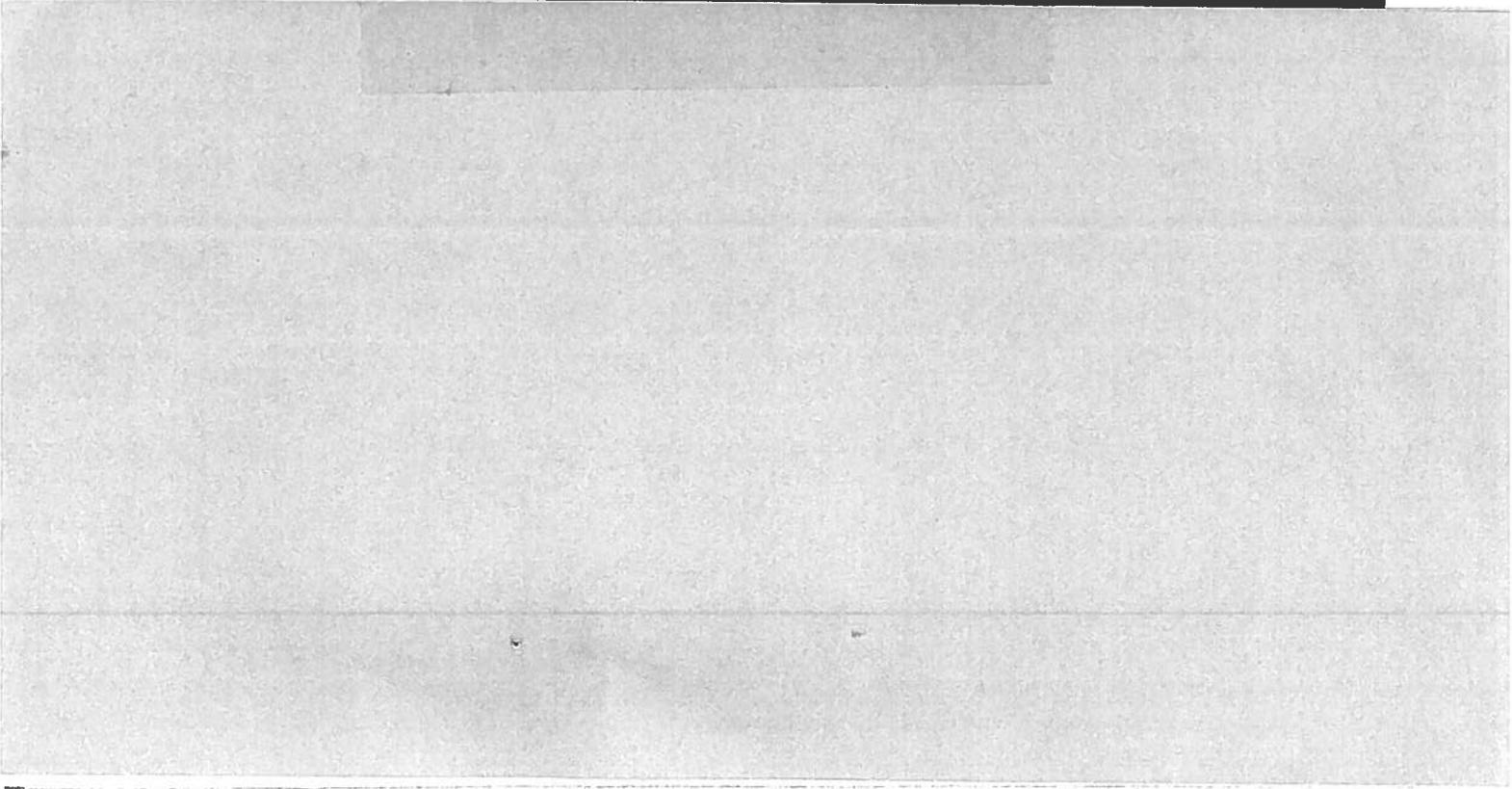
# CAMPAIGN FINANCE REPORT

(NOTE: This report must be clear and legible. It may be typed or printed in blue or black ink.)

Filer Identification Number: <span style="float:right">▶</span>		Report Filed By: <span style="float:right">▶</span>		CANDIDATE <sup>1.</sup>		COMMITTEE <sup>2.</sup> <input checked="" type="checkbox"/>		LOBBYIST <sup>3.</sup>			
Name of Filing Committee, Candidate or Lobbyist: <u>Friends of Bryan Callahan</u>											
Street Address: <u>633 Umain St</u>											
City: <u>Bethlehem</u>				State: <u>PA</u>		Zip Code: <u>-</u>					
TYPE OF REPORT  (place X to the right of report type)	8TH TUESDAY PRE-PRIMARY <sup>1.</sup>	2ND FRIDAY PRE-PRIMAR <sup>2.</sup>	30 DAY POS PRIMARY <sup>3.</sup>	AMENDMENT REPORT? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>							
	8TH TUESDA PRE-ELECTION <sup>4.</sup>	2ND FRIDAY PRE-ELECTION <sup>5.</sup>	30 DAY POST ELECTION <sup>6.</sup> <input checked="" type="checkbox"/>	TERMINATION REPORT? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>							
	ANNUAL REPORT <sup>7.</sup> <input checked="" type="checkbox"/>	YEAR <u>2017</u>		FILING METHOD (CHECK ONE) <span style="float:right">▶</span>		PAPER <input checked="" type="checkbox"/>		DISKETTE <input type="checkbox"/>			
Name of Office Sought by Candidate: <u>Bethlehem City Council</u>					DATE OF ELECTION MO. DAY YEAR <u>11 7 2017</u>			District Number	Office Code	Party Code <u>Dem</u>	County Code
(SEE INSTRUCTIONS FOR CODES)											
Summary of Receipts and Expenditures from: <span style="float:right">▶</span>					MO. DAY YEAR <u>10 24 2017</u>			To MO. DAY YEAR <u>11 27 2017</u>			
A. Amount Brought Forward From Last Report					\$ <u>17,899.78</u>						
B. Total Monetary Contributions and Receipts (From Schedule I)					\$ <u>650.00</u>						
C. Total Funds Available (Sum of Lines A and B)					\$ <u>18,549.78</u>						
D. Total Expenditures (From Schedule III)					\$ <u>5,906.95</u>						
E. Ending Cash Balance (Subtract Line D from Line C)					\$ <u>12,642.83</u>						
F. Value of In-Kind Contributions Received (From Schedule II)					\$ <u>0</u>						
G. Unpaid Debts and Obligations (From Schedule IV)					\$ <u>0</u>						

FOR OFFICE USE ONLY	
(This area is reserved for the use of the filing agent or the filer. It may be used to provide additional information, such as a list of contributors, or to provide a copy of the report to the filer.)	

AFFIDAVIT SECTION



# CONTRIBUTIONS AND RECEIPTS

## Detailed Summary Page

Name of Filing Committee or Candidate <i>Friends of Bryan Callahan</i>	Reporting Period From <i>7/01/24</i> To <i>11/27/24</i>
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<b>1. UNITEMIZED CONTRIBUTIONS AND RECEIPTS - \$50.00 OR LESS PER CONTRIBUTOR</b>	
TOTAL for the Reporting Period (1)	\$ <i>0</i>

<b>2. CONTRIBUTIONS \$50.01 TO \$250.00 (FROM PART A AND PART B)</b>	
Contributions Received from Political Committees (Part A)	\$ <i>0</i>
All Other Contributions (Part B)	\$ <i>150.00</i>
TOTAL for the Reporting Period (2)	\$ <i>150.00</i>

<b>3. CONTRIBUTIONS OVER \$250.00 (FROM PART C AND PART D)</b>	
Contributions Received from Political Committees (Part C)	\$ <i>0</i>
All Other Contributions (Part D)	\$ <i>500.00</i>
TOTAL for the Reporting Period (3)	\$ <i>500.00</i>

<b>4. OTHER RECEIPTS - REFUNDS, INTEREST EARNED, RETURNED CHECKS, ETC. (FROM PART E)</b>	
TOTAL for the Reporting Period (4)	\$ <i>0</i>

<b>TOTAL MONETARY CONTRIBUTIONS AND RECEIPTS DURING THIS REPORTING PERIOD</b> (Add and enter amount totals from Boxes 1, 2, 3 and 4; also enter this amount on Page 1, Report Cover Page, Item B.)	\$ <i>650.00</i>
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## PART A CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

Use this Part to itemize only contributions received from political committees with an aggregate value from \$50.01 to \$250.00 in the reporting period.

Name of Filing Committee or Candidate <i>Friends of Bryan Cellabian</i>	Reporting Period From <i>10/24</i> To <i>11/27/17</i>
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Full Name of Contributing Committee	DATE			AMOUNT
	MO.	DAY	YEAR	
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State				\$
Zip Code (Plus 4)				\$
City				\$
State				\$
Zip Code (Plus 4)				\$
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State				\$
Zip Code (Plus 4)				



**PART C**  
**CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES**  
**OVER \$250.00**

Use this Part to itemize only contributions received from political committees with an aggregate value over \$250.00 in the reporting period.

Name of Filing Committee or Candidate <i>Friends of Bryan Callahan</i>	Reporting Period From <i>10/24</i> To <i>11/27/17</i>
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Full Name of Contributing Committee	DATE			AMOUNT
	MO.	DAY	YEAR	
Mailing Address	MO.	DAY	YEAR	\$
City State Zip Code (Plus 4)	MO.	DAY	YEAR	\$
Full Name of Contributing Committee	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City State Zip Code (Plus 4)	MO.	DAY	YEAR	\$
Full Name of Contributing Committee	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City State Zip Code (Plus 4)	MO.	DAY	YEAR	\$
Full Name of Contributing Committee	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City State Zip Code (Plus 4)	MO.	DAY	YEAR	\$
Full Name of Contributing Committee	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City State Zip Code (Plus 4)	MO.	DAY	YEAR	\$
Full Name of Contributing Committee	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City State Zip Code (Plus 4)	MO.	DAY	YEAR	\$
Full Name of Contributing Committee	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City State Zip Code (Plus 4)	MO.	DAY	YEAR	\$
Full Name of Contributing Committee	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City State Zip Code (Plus 4)	MO.	DAY	YEAR	\$

PAGE TOTAL \$ _____
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Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.

PART D  
**ALL OTHER CONTRIBUTIONS**

OVER \$250.00

Use this Part to itemize all other contributions with an aggregate value of  
over \$250.00 in the reporting period.

(Exclude contributions from political committees reported in Part C.)

Name of Filing Committee or Candidate <i>Friends of Bryan Callahan</i>	Reporting Period From <i>2024</i> To <i>12/31/17</i>
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			DATE	AMOUNT
Full Name of Contributor	MO.	DAY	YEAR	
<i>King Spry Herman Frensch + Faul LLC</i>	<i>11</i>	<i>8</i>	<i>17</i>	<i>\$ 500.00</i>
Mailing Address	MO.	DAY	YEAR	\$
<i>One W. Broad St</i>				\$
City	MO.	DAY	YEAR	\$
<i>Bethlehem</i>				\$
State				
<i>PA</i>				
Zip Code (Plus 4)				
<i>18018</i>				
Employer Name				Occupation
<i>Above Partnership next corp</i>				<i>N/A Lawyers</i>
Employer Mailing Address/Principal Place of Business				

Full Name of Contributor				MO.	DAY	YEAR	\$
Mailing Address				MO.	DAY	YEAR	\$
City				MO.	DAY	YEAR	\$
State							
Zip Code (Plus 4)							
Employer Name				Occupation			
Employer Mailing Address/Principal Place of Business							

Full Name of Contributor				MO.	DAY	YEAR	\$
Mailing Address				MO.	DAY	YEAR	\$
City				MO.	DAY	YEAR	\$
State							
Zip Code (Plus 4)							
Employer Name				Occupation			
Employer Mailing Address/Principal Place of Business							

Full Name of Contributor				MO.	DAY	YEAR	\$
Mailing Address				MO.	DAY	YEAR	\$
City				MO.	DAY	YEAR	\$
State							
Zip Code (Plus 4)							
Employer Name				Occupation			
Employer Mailing Address/Principal Place of Business							

Full Name of Contributor				MO.	DAY	YEAR	\$
Mailing Address				MO.	DAY	YEAR	\$
City				MO.	DAY	YEAR	\$
State							
Zip Code (Plus 4)							
Employer Name				Occupation			
Employer Mailing Address/Principal Place of Business							

Enter Grand Total of Part D on Schedule I, Detailed Summary Page, Section 3.

PAGE TOTAL  
*\$ 500.00*

**PART E  
OTHER RECEIPTS**

**REFUNDS, INTEREST INCOME, RETURNED CHECKS, ETC.**

Use this Part to report refunds received, interest earned, returned checks and prior expenditures that were returned to the filer.

Name of Filing Committee or Candidate <i>Friends of Bryan Callahan</i>	Reporting Period From <i>10/24</i> To <i>11/27/17</i>
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Full Name							Amount
Mailing Address							\$
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR		
Receipt Description							
Full Name							Amount
Mailing Address							\$
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR		
Receipt Description							
Full Name							Amount
Mailing Address							\$
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR		
Receipt Description							
Full Name							Amount
Mailing Address							\$
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR		
Receipt Description							
Full Name							Amount
Mailing Address							\$
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR		
Receipt Description							
Full Name							Amount
Mailing Address							\$
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR		
Receipt Description							
Full Name							Amount
Mailing Address							\$
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR		
Receipt Description							

PAGE TOTAL
\$ <u>                    </u>

Enter Grand Total of Part E on Schedule I, Detailed Summary Page, Section 4.

# IN-KIND CONTRIBUTIONS AND VALUABLE THINGS RECEIVED

USE THIS SCHEDULE TO REPORT ALL IN-KIND CONTRIBUTIONS OF VALUABLE THINGS DURING THE REPORTING PERIOD.

Detailed Summary Page

Name of Filing Committee or Candidate <i>Friends of Bryan Colbhan</i>	Reporting Period From <i>1/29</i> To <i>1/27/17</i>
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<b>1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR</b>	
TOTAL for the Reporting Period	(1) \$

<b>2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)</b>	
TOTAL for the Reporting Period	(2) \$

<b>3. IN-KIND CONTRIBUTION RECEIVED - VALUE OVER \$250.00 (FROM PART G)</b>	
TOTAL for the Reporting Period	(3) \$

TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (Add and enter amount totals from Boxes 1, 2, and 3; also enter on Page 1, Report Cover Page, Item F.)	\$
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**SCHEDULE II  
PART F  
IN-KIND CONTRIBUTIONS RECEIVED**

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate <i>Friends of Bryan Callahan</i>	Reporting Period From <i>10/24</i> To <i>11/27/17</i>
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				DATE			AMOUNT
Full Name of Contributor				MO.	DAY	YEAR	\$
Mailing Address				MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)		MO.	DAY	YEAR	\$
Description of Contribution:							
Full Name of Contributor				MO.	DAY	YEAR	\$
Mailing Address				MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)		MO.	DAY	YEAR	\$
Description of Contribution:							
Full Name of Contributor				MO.	DAY	YEAR	\$
Mailing Address				MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)		MO.	DAY	YEAR	\$
Description of Contribution:							
Full Name of Contributor				MO.	DAY	YEAR	\$
Mailing Address				MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)		MO.	DAY	YEAR	\$
Description of Contribution:							
Full Name of Contributor				MO.	DAY	YEAR	\$
Mailing Address				MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)		MO.	DAY	YEAR	\$
Description of Contribution:							
Full Name of Contributor				MO.	DAY	YEAR	\$
Mailing Address				MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)		MO.	DAY	YEAR	\$
Description of Contribution:							

Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.

PAGE TOTAL  
\$



SCHEDULE III  
STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate <b>Friends of Bryan Callahan</b>	Reporting Period From <b>10/24</b> To <b>11/27/17</b>
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To Whom Paid <b>WHOL - AM/West AM-FM</b>	MO. <b>10</b>	DAY <b>26</b>	YEAR <b>17</b>	Amount <b>\$ 1,500.00</b>
Mailing Address <b>1125 Colorado St</b>				
Description of Expenditure <b>Radio Ads</b>				
City <b>Allentown</b>	State <b>PA</b>	Zip Code (Plus 4) <b>18103 -</b>		

To Whom Paid <b>L V Print Center</b>	MO. <b>10</b>	DAY <b>28</b>	YEAR <b>17</b>	Amount <b>\$ 2,838.31</b>
Mailing Address <b>1701 UNION BLVD</b>				
Description of Expenditure <b>Umailer</b>				
City <b>Allentown</b>	State <b>PA</b>	Zip Code (Plus 4) <b>18103 -</b>		
Description of Expenditure <b>Printing + Postage</b>				

To Whom Paid <b>McNeill for PA</b>	MO. <b>11</b>	DAY <b>13</b>	YEAR <b>17</b>	Amount <b>\$ 500.00</b>
Mailing Address <b>3163 Front St</b>				
Description of Expenditure <b>Donations</b>				
City <b>Whippany</b>	State <b>PA</b>	Zip Code (Plus 4) <b>18052 -</b>		

To Whom Paid <b>Celeste Dee</b>	MO. <b>11</b>	DAY <b>13</b>	YEAR <b>17</b>	Amount <b>\$ 1,000.00</b>
Mailing Address <b>2285 Schenewille Rd</b>				
Description of Expenditure <b>Campaign Work</b>				
City <b>Bethlehem</b>	State <b>PA</b>	Zip Code (Plus 4) <b>18017 -</b>		

To Whom Paid <b>Northampton County Democrats</b>	MO. <b>11</b>	DAY <b>24</b>	YEAR <b>17</b>	Amount <b>\$ 68.64</b>
Mailing Address <b>PO Box 22256</b>				
Description of Expenditure <b>Votebuilder</b>				
City <b>Lehigh Valley</b>	State <b>PA</b>	Zip Code (Plus 4) <b>18002 -</b>		

To Whom Paid	MO.	DAY	YEAR	Amount <b>\$</b>
Mailing Address				
Description of Expenditure				
City	State	Zip Code (Plus 4)		

To Whom Paid	MO.	DAY	YEAR	Amount <b>\$</b>
Mailing Address				
Description of Expenditure				
City	State	Zip Code (Plus 4)		

To Whom Paid	MO.	DAY	YEAR	Amount <b>\$</b>
Mailing Address				
Description of Expenditure				
City	State	Zip Code (Plus 4)		

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.

PAGE TOTAL  
**\$ 5,906.95**

**SCHEDULE IV  
STATEMENT OF UNPAID DEBTS**

Use this Section to itemize all unpaid debts and obligations which are outstanding at the end of the reporting period.

Name of Filing Committee or Candidate <i>Friends of Bryan Callahan</i>	Reporting Period From <i>10/24</i> To <i>11/27/17</i>
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Name of Creditor					Outstanding Balance of Debt	
Mailing Address					\$	
DATE DEBT INCURRED					MO. DAY YEAR	
City					State Zip Code (Plus 4)	
Description of Debt						
Name of Creditor					Outstanding Balance of Debt	
Mailing Address					\$	
DATE DEBT INCURRED					MO. DAY YEAR	
City					State Zip Code (Plus 4)	
Description of Debt						
Name of Creditor					Outstanding Balance of Debt	
Mailing Address					\$	
DATE DEBT INCURRED					MO. DAY YEAR	
City					State Zip Code (Plus 4)	
Description of Debt						
Name of Creditor					Outstanding Balance of Debt	
Mailing Address					\$	
DATE DEBT INCURRED					MO. DAY YEAR	
City					State Zip Code (Plus 4)	
Description of Debt						
Name of Creditor					Outstanding Balance of Debt	
Mailing Address					\$	
DATE DEBT INCURRED					MO. DAY YEAR	
City					State Zip Code (Plus 4)	
Description of Debt						
Name of Creditor					Outstanding Balance of Debt	
Mailing Address					\$	
DATE DEBT INCURRED					MO. DAY YEAR	
City					State Zip Code (Plus 4)	
Description of Debt						

Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.

PAGE TOTAL
\$